

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: Georgia

CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A. Target Group:

Children ages 0 to 21 who are "at-risk" because they exhibit three or more of the following characteristics:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening.
3. Few friends or school alienation.
4. Little or no extracurricular involvement.
5. Frequent disciplinary referrals or suspensions.
6. Dysfunctional family situation.
7. Mental health diagnosis.
8. Single parent family.
9. One or more grade retentions.
10. Born to a teenage mother.
11. Frequent absences, tardies, or school transfers.
12. Limited English proficiency.
13. Low Income Family
14. Lack of appropriate physical necessities (clothing, proper hygiene, etc.)
15. One or more years below grade placement in reading and math.
16. History of substance abuse, Juvenile Court involvement, or at risk for sexually transmitted disease.
17. Frequent physical complaints, low self-esteem, or expresses feelings of lack of control of life.
18. Low achievement test scores (35th percentile and below on Iowa Test of Basic Skills (ITBS) or Test of Achievement and Proficiency (TAP), low grades (failing two or more academic subjects in a grading period), or repeated two or more grades.
19. History of exposure to direct or indirect violence.
20. History of sexual or physical abuse or neglect.
21. Family members with limited job skills and difficulty finding employment.
22. Inadequate utilities and household appliances.

TN No. 96-011

Supersedes

TN No. New

Approved Date

9-27-96

Effective Date

7-1-96

B. Areas of State in which services will be provided:

☐ Entire State.

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide):

Floyd County, Georgia

C. Comparability of Services

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(2) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at-risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing, and other services; and to encourage the use of various community resources through referral to appropriate providers. Case management services will provide necessary coordination with the providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.

TN No. 96-011  
Supersedes  
TN No. New

Approved Date 9-27-96 Effectove Date 7-1-96

3. Monitoring and follow-up with the eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 visits annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

E. Qualification of Providers:

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet with following requirements:

- a. Must have the capacity to provide the full range of at-risk case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
- c. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, Social Services, Counseling Services, Psychological Services, Student Assistance, Special Education, and Nutritional Services).
- d. Must have demonstrated the ability to obtain collaboration between public and private services providers.
- e. In order to avoid duplication of services and to promote effective community level networking, case management providers must have signed a collaborative agreement with the Floyd County Department of Family and Children Services, Floyd County Health Department, Floyd County School System, the Rome City School System, Mental Health, Juvenile Court, Department of Children & Youth Services, and the Floyd County Health Department.

---

TN No. 96-011  
Supersedes  
TN No. New

Approval Date 9-27-96 Effective Date 7-1-96

- f. Case Managers must have a high school diploma or the equivalent, and have knowledge of the following: Family dynamics and family needs; human diversity; community agencies and resources; providing services to families in poverty; strong interpersonal skills; and cultures of families to be served.
  - g. Case managers must complete a pre-service training program and a Family Connection designed and supervised practice experience.
- F. The state assures that the provision of case management services will not restrict an individual's free choice of providers of Section 1902(a)(23) of the Act.
  - 1. Eligible recipients will have free choice of the providers of case management services.
  - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

TN No. 96-011  
Supersedes  
TN No. 93-022

Approved Date 9-27-96 Effective Date 7-1-96

---

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Georgia

CHILDREN AT-RISK CASE MANAGEMENT SERVICES

**A. Target Group:**

Medicaid eligible children aged 0-21 in Early County who are "at risk" of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening.
3. Free or reduced price lunch.
4. One or more retentions.
5. Iowa Test of Basic Skills (ITBS)/Test of Achievement and Proficiency (TAP) reading scores below the 35th percentile and not receiving special education services.
6. Five or more unexcused absences in any one twenty (20) day attendance period.
7. Two or more suspensions during the most recent school year.
8. Limited English proficiency.
9. Transferred two or more times during the most recent school year.
10. One or more years below grade placement in the reading basal.
11. Few friends or school alienation.
12. Little or no extracurricular involvement.
13. Children with family members identified as drug and/or alcohol abusers.
14. Inadequate health care.
15. Child/adolescent is a teen mother/father.
16. Frequent disciplinary referrals.
17. Dysfunctional home situation.
18. Disabled without mental impairment.
19. Inadequate utilities and household appliances.
20. Family members with limited job skills and difficulty finding employment.
21. Child/Adolescent is pregnant.
22. Parent or older sibling(s) was/is a teen parent.
23. History of incarceration and/or probation of child, parent, sibling.
24. Child, parent or caretaker with chronic health problems.
25. Poor parental involvement in meeting/addressing educational, physical health, mental and emotional needs of child.

---

TN No. 96-013

Supersedes

TN No. New

Approval Date 10-24-96 Effective Date 7-1-96

**B. Areas of State in which services will be provided:**

- ☐ Entire State  
☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide): Early County.

**C. Comparability of Services:**

- ☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.  
☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

**D. Definition of Services:**

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing and other services; and to encourage the use of various community resources through referral to appropriate providers. Case Management services will provide necessary coordination with providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and following-up with eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 units annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

TN No. 96-013  
Supersedes  
TN No. New

Approval Date 10-24-96 Effective Date 7-1-96

**E. Qualification of Providers:**

**1. Provider Qualifications**

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet with following requirements:

- a. Must have the capacity to provide the full range of at-risk case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
- c. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, Social Services, Counseling Services, Psychological Services, Student Assistance, Special Education, and Nutritional Services).
- d. Must have demonstrated the ability to obtain collaboration between public and private service providers.
- e. In order to avoid duplication of services and to promote effective community level networking, case management providers must have signed a collaborative agreement with the Early County Health Department, Early County Department of Family and Children Services, Early County Juvenile Court & Division of Children and Youth Services, Early County Public Schools, Early County Mental Health and Kids Can Program, Blakely-Early County Housing Authority, Early County Commissioners, City of Blakely and Boys & Girls Club.
- f. Case Management Supervisors must hold a Bachelor's Degree in a human services field (i.e., psychology, sociology, social work, humanities, counseling, career services and have two years of experience working with at-risk children and their families.
- g. Case Managers must have a high school degree or equivalent and a demonstrated ability to work effectively with at-risk children and their families.
- h. Both the case management supervisor(s) and case managers must complete a pre-service training program and a Family Connection designed and supervised practicum experience.

TN No. 96-013  
Supersedes  
TN No. New

Approval Date 10-24-96 Effective Date 7-1-96

- F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
  2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under either program authorities for this same purpose. Reimbursement methodology is found in Attachment 4.19-B, pages 5d and 5e.

TN No. 96-013  
Supersedes  
TN No. New

Approval Date 10-24-96 Effective Date 7-1-96



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: Georgia

CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A. Target Group:

Children in grades Pre K-5 through 5 and special service programs to include: Girls Alternative Program (GAP) for pregnant middle and high schoolers; Crossroads Academy for alternate behavior management for middle schoolers and high schoolers; Juvenile Justice In House Probation (new) for middle schoolers and high schoolers, and their Medicaid eligible siblings who attend the Grady County Schools and are at risk of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No Health Check EPSDT initial screen or no periodic screening.
3. Free or reduced price lunch.
4. One or more retentions.
5. Iowa Test of Basic Reading Scores below the 35th percentile and not receiving special education services.
6. Five or more unexcused absences in any one twenty (20) day attendance period.
7. Two or more suspensions during the most recent school year.
8. Limited English proficiency.
9. Transferred two or more times during the most recent school year.
10. One or more years below grade placement in reading or math program.

Those displaying two of the above characteristics and at least one of the following factors:

1. Few friends or school alienation.
2. Little or no extracurricular involvement.
3. Frequent disciplinary referrals.
4. Dysfunctional home situation.
5. Disabled without mental impairment.
6. Family members with limited job skills and difficulty finding employment.

---

TN No. 96-014

Supersedes

TN No. New

Approval Date

11-4-96

Effective Date

7-1-96

**B. Areas of State in which services will be provided:**

- ☐ Entire State.
- ☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide):  
Grady County

**C. Comparability of Services:**

- ☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

**D. Definition of Services:**

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at-risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing, and other services; and to encourage the use of various community resources through referral to appropriate providers. Case management services will provide necessary coordination with the providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and follow-up with the eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 visits annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

**E. Qualification of Providers:**

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet with following requirements:

TN No. 96-014  
Supersedes  
TN No. New

Approval Date 11-4-96 Effective Date 7-1-96